



TFW 2825 \$

Modified 02-03

PTO/SB/21 (02-03)  
Approved for use through 9/30/00. OMB 0657-0031  
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)  Mail Stop: <b>AMENDMENT</b>  Express Mail Receipt No.  Total Number of Pages in This Submission	Application / Conf. No.	10/082,441 / 6299
	Filing Date	February 22, 2002
	First Named Inventor	L. James Hwang
	Examiner Name	Stacy Whitmore
	Art Unit	2825
	Patent No.	
Attorney Docket Number		X-1000 US

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (with Recordation Cover Sheet)	<input type="checkbox"/> After Allowance Communication to
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<input type="checkbox"/> Preliminary Amendment	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
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<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> To Convert a Provisional Application	<input type="checkbox"/> Other Enclosure(s) (please identify below):
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Customer Number	<b>24309</b> (Customer Number)	Reg. Number 51,959
Attn: Justin Liu		
Signature		
Date	December 27, 2005	Charge any additional fees required/credit any overpayment to our Deposit Account Number: 24-0040

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I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450 on this date:			
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Signature		Date	December 27, 2005

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Approved for use through 10-31-2002. OMB 0651-0032  
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

FEE TRANSMITTAL for FY 2005		Complete if Known	
		Application / Conf. No.	10/082,441 / 6299
Patent fees are subject to annual revision		Filing Date	February 22, 2002
		First Named Inventor	L. James Hwang
		Examiner Name	Alexander O. Williams
		Art Unit	2825
		Attorney Docket No.	X-1000 US
TOTAL AMOUNT OF PAYMENT	(\$)	180.00	

METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)
1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees, any additional fees required, and credit any over payments to:  <input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 24-0040 Deposit Account Name: XILINX, INC.	3. ADDITIONAL FEES Large Entity Fee Fee Code (\$)
<b>FEE CALCULATION</b> <b>1. BASIC FILING FEE</b> Large Entity Fee Fee Fee Description Fee Paid Code (\$) 1001 770 Utility filing fee 1002 330 Design filing fee 1003 510 Plant filing fee 1004 790 Reissue filing fee 105 160 Provisional filing fee SUBTOTAL (1) (\$)	Fee Description Fee Paid 1051 130 Surcharge - late filing fee or oath 1052 50 Surcharge - late provisional filing fee or cover sheet. 1812 2,520 For filing a request for exparte reexamination 1804 920* Requesting publication of SIR prior to Examiner action 1805 1,840* Requesting publication of SIR after Examiner action 1251 120 Extension for reply within first month 1252 450 Extension for reply within second month 1253 1020 Extension for reply within third month 1254 1,530 Extension for reply within fourth month 1255 2,080 Extension for reply within fifth month 1401 500 Notice of Appeal 1402 500 Filing a brief in support of an appeal 1403 1000 Request for oral hearing 1451 1,510 Petition to institute a public use proceeding 1452 110 Petition to revive - unavoidable 1453 1,370 Petition to revive - unintentional 1501 1,370 Utility issue fee (or reissue) 1460 130 Petitions to the Commissioner 1807 50 Petitions related to provisional applications 1806 180 Submission of Information Disclosure Stmt 8021 40 Recording each patent assignment per property (times number of properties) 1809 790 Filing a submission after final rejection (37 CFR 1.129(a)) 1810 790 For each additional invention to be examined (37 CFR 1.129(b)) 1801 790 Request for Continued Examination (RCE) Other fee (specify) *Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 180.00
<b>2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE</b> Total Claims -20** = Extra Fee from below Fee Paid Indep. Claims - 3** = Multiple Dependent Claims **or number previously paid, if greater; For Reissues, see below Large Entity Fee Fee Fee Description Code (\$) 1202 18 Claims in excess of 20 1201 86 Independent claims in excess of 3 1203 290 Multiple dependent claim, if not paid 1204 86 **Reissue independent claims over original patent 1205 18 **Reissue claims in excess of 20 and over original patent SUBTOTAL (2) (\$)	

SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Justin Liu	Registration No. (Attorney/Agent)	51,959
Signature		Telephone	408-879-6149
		Date	12-27-2005

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